

PGY2 Ambulatory Care Pharmacy Residency

emphasis in rural healthcare



VA Hudson Valley Health Care System
Castle Point, NY



VA
HEALTH
CARE

Defining
EXCELLENCE
in the 21st Century

About VA HVHCS (Visit our facility's website at: <http://www.hudsonvalley.va.gov/>)

In 1996, two Veteran Administration Medical Centers (VAMCs) in Veterans Integrated Service Network (VISN) 3 consolidated their services. It was the first locally initiated integration of its kind. In March of 1997, Castle Point VAMC and Franklin Delano Roosevelt (FDR) VA Hospital joined to become the VA Hudson Valley Health Care System (VA HVHCS), which now services 28,000 Hudson Valley veterans annually. Consisting of two main campuses and a host of community based outpatient clinics (CBOCs), VA HVHCS is dedicated to providing a wide range of services, including medical, psychiatric, and extended care.

FDR Montrose:

As the southern facility of VA HVHCS, the FDR Montrose Campus is located in northern Westchester County just 38 miles north of New York City. A former estate and original historic site of the mansion Boscobel or "beautiful woods," this medical facility opened in 1950, boasts one of the largest community home care programs for veterans within the entire VA system. The program follows veterans who live in community residences, providing a link to a full array of health and medical services available at both main campuses. The FDR Montrose campus provides services for acute and chronic mental health and extended care to a large geriatric population. Three residential programs specialize in recovery from substance abuse, post-traumatic stress disorder, and homelessness. Outpatient services includes primary care, mental health, dentistry, optometry, podiatry, and women's health clinics.



Castle Point:

The northern facility of VA HVHCS, the Castle Point Campus, opened in 1924 and is located on the scenic banks of the Hudson River, just 65 miles north of New York City. It delivers modern, progressive healthcare services to our nation's veterans. A wide range of medical services, intermediate medicine, rehabilitation medicine, same-day surgery, and primary care are available at this facility. Various specialty care services as well as outpatient mental health services are also available.



CBOCs:

There are a number of CBOCs in surrounding counties: Orange County (Goshen and Port Jervis), Sullivan County (Monticello), Rockland County (New City), Putnam County (Carmel), and Dutchess County (Poughkeepsie and Pine Plains). These clinics bring care closer to veterans in the communities in which they live.



Pictured from left to right are the Monticello, Pine Plains, and Port Jervis rural community-based outpatient clinics (CBOCs).

Rural Health CBOCs:

VA HVHCS sponsors three rural CBOCs in Monticello, Pine Plains, and Port Jervis. Each rural CBOC is approximately a 1 hour and 15 minute drive from the FDR Montrose campus and less than an hour's drive from the Castle Point campus. The Monticello CBOC has a panel of about 1130 patients per provider (ranging from age 23-92 years) and 94% live in rural areas. The Port Jervis CBOCs has an average panel of 1169 patients per provider (ranging from age 26-91 year) with 93% living in a rural area. The Pine Plains CBOC has an average panel of 466 patients per provider (ranging from age 23-92 years) with all patients living in rural areas. The top three diagnoses for these patients are obesity, hypertension, and diabetes.

VA Network:

VA HVHCS is part of a larger network of care - VISN 3 - that includes VAMCs in the Bronx, Brooklyn, East Orange, Lyons, Manhattan, and Northport. Together they represent a comprehensive healthcare system available to veterans throughout the NY/NJ area. A sharing relationship with Keller Army Hospital at West Point also provides veterans with enhanced services. Focusing on improving access and continuity of care, VA HVHCS provides innovative healthcare with an emphasis on performance improvement. A majority of our patients receive care through primary care clinics focusing on health promotion and disease prevention. We use the latest technology to provide high quality healthcare, including a computerized medical record, barcoding for medication administration and an automated system for filling prescriptions. Patient and customer satisfaction is one of our top priorities. We continue to expand and improve healthcare programs and services to meet the needs of our patients. Veterans can receive information and care through patient education, preventive medicine, telephone advice systems, urgent care, acute and long-term inpatient care, outpatient care, rehabilitation, hospice and home healthcare services.



Program Overview

VA HVHCS offers a post-graduate year two (PGY2) Ambulatory Care Pharmacy Residency Program, which is currently in the American Society of Health System Pharmacists (ASHP) candidate status for accreditation. This multi-site, 12-month (July 1 – June 30) program is designed to further develop medication management skills in a multidisciplinary ambulatory environment, with focus on continuity of care in the rural health care setting.

Emphasis is placed on providing the resident with direct patient care responsibilities to develop clinical skills, knowledge, and competencies. The resident is afforded the opportunity to longitudinally monitor patients' clinical progress through pharmacy-managed ambulatory care clinics. The resident works closely with clinical pharmacy specialists who have responsibility for patient care in Anticoagulation, Diabetes, Dyslipidemia, Hypertension, Tobacco Cessation, among other disease states. Each clinical pharmacy specialist has a scope of practice, which includes the authority to write prescriptions, order laboratory and other diagnostic tests, and consult other services when indicated. The resident will be responsible for pharmacotherapy decisions, patient counseling, writing progress notes, and monitoring drug therapy to optimize therapeutic outcomes. Most patients are managed by outpatient clinic visits but telephone follow-up may also be part of patient care provided. In addition, state-of-the art clinical video tele-health (CVT) equipment may be utilized.

To the further development of clinical practice skills, the resident will acquire and cultivate advanced leadership skills. The resident will assist in the development of new policies and procedures needed to carry out the Mission of Pharmacy Service to improve the quality of patient care. The resident will gain valuable experience in our pharmacy administrative programs, including local medication use evaluations, committee work, academic detailing, and developing clinical programs.

Furthermore, the resident will be afforded the opportunity to participate in several patient educational programs and will gain experience in lecture preparation, didactic teaching, and in the precepting of students. The PGY2 Ambulatory Care pharmacy resident also serves as a mentor to first year residents and serves as the Chief Resident during the course of the year. Additional teaching experience is provided by delivery of in-services for staff development and participation in pharmacy journal clubs and case discussions.

Completion of a project of interest to the resident is also required. The resident will work with a project preceptor to plan, carry out, and evaluate the results of this project. These results are presented at the Eastern States Pharmacy Residents and Preceptors Conference in the spring of each year. A written manuscript of this project is required for completion of the residency.

Program Affiliation

The residency is affiliated with the Hudson Valley Rural Geriatric Education Collaborative Program and funded by the VHA Office of Rural Health & Office of Academic Affiliations. This collaborative program aims to prepare associated health trainees to provide high-quality health care to older rural veterans. As such, residents provide patient care as members of interdisciplinary teams at our rural health community based outpatient clinics. The resident will also take part in multi-modal educational offerings (i.e. journal clubs, case conferences, seminars, workshops) offered by the VISN 3 GRECC (geriatrics research, education, and clinical center) and RHTI (rural health training & education initiative).



Pharmacy Services

Pharmacy services at the rural CBOCs include pharmacist-directed chronic disease state management, group education classes, drug information, formulary management, as well as limited on-site medication dispensing and counseling. The PGY2 Ambulatory Care pharmacy resident will work as part of an integrated multidisciplinary team consisting of primary care providers, clinical pharmacists, social workers, registered nurses, and medical technicians. The resident will also have the opportunity to develop innovative medication management services and patient care clinics. The practice environment promotes the development of the skills necessary for the resident to function as an independent clinical pharmacy specialist.



Required Learning Experiences:

- Orientation
- Ambulatory Care/ CBOC PACT (emphasis in diabetes, lipid, & hypertension management)
- Anticoagulation
- Clinical Pharmacy Management/ Administration
- Teaching & Health Education
- Residency Project

Elective Learning Experiences:

- Home Based Primary Care
- Infectious Disease/ Hepatitis C
- Pain Management
- Tobacco Cessation



Purpose

The purpose of the PGY2 Ambulatory Care Pharmacy Residency Program is to develop ambulatory care clinical pharmacy specialists to be providers of direct patient care in an ambulatory care (outpatient/rural health) practice setting and integrate as members of an interdisciplinary healthcare team.

Residents completing the PGY2 Ambulatory Care Pharmacy Residency Program will be competent and confident practitioners of pharmaceutical care in the ambulatory care practice setting. They will be a skilled teacher, excellent leader, and proficient practitioner who is accountable for achieving optimal drug therapy outcomes in this outpatient setting. The graduate will function independently as well as be prepared to work collaboratively as a member of a healthcare team. These pharmacists will exercise proficiency in communication and education of other health care professionals, patients, and the community. Residency graduates should possess competencies that enable attainment of board certification in ambulatory care (BCACP), and are qualified to practice as an ambulatory care clinical pharmacy specialist.

Outcomes

1. Establish a collaborative interdisciplinary practice.
2. In a collaborative interdisciplinary ambulatory practice provide efficient, effective, evidence-based, patient-centered treatment for chronic and/or acute illnesses in all degrees of complexity.
3. Demonstrate leadership and practice management skills.
4. Promote health improvement, wellness, and disease prevention.
5. Demonstrate excellence in the provision of training or educational activities for health care professionals and health care professionals in training.
6. Serve as an authoritative resource on the optimal use of medications.

Goals

Clinical development

- ◆ Provide patient-specific medication management services within an approved scope of practice which results in positive patient outcomes
- ◆ Develop strong patient care skills in chronic ambulatory care disease states
- ◆ Provide patient specific educational services on a one-to-one basis as well as in group meetings
- ◆ Become familiar with pharmacy benefit management principles including the non-formulary process
- ◆ Become established as an integral part of the healthcare team

Educational development

- ◆ Effectively evaluate and apply data from clinical trials into pharmacy practice skills
- ◆ Develop skills needed to precept both VA HVHCS PGY1 pharmacy practice residents and PharmD students.
- ◆ Develop skills to effectively educate healthcare professionals in small discussion groups as well as didactic type lectures
- ◆ Develop skills to provide competency based training to pharmacy employees including pharmacists and pharmacy technicians

Personal development

- ◆ Develop the skills necessary to effectively self-evaluate one's work
- ◆ Develop written and verbal communication skills to successfully practice in ambulatory care clinics
- ◆ Demonstrate effective time management skills needed to effectively practice as a clinical pharmacy specialist

Application Requirements:

- Letter of intent*
- Curriculum vitae
- Official college transcripts (College of Pharmacy)
- Three references (PhORCAS standardized reference form is sufficient)
- Proof of US citizenship

*The letter of intent should include the answers to the following three questions: (1) Why do you want to do this residency? (2) What are your personal and professional strengths? (3) Where do you see yourself in five years?

Application materials should be submitted through the Pharmacy Online Residency Centralized Application Service (PhORCAS). Additional information on PhORCAS may be found at:

<http://www.ashp.org/phorcas>

All application materials must be received by **January 15th** in order to be considered for an interview.

Program Structure

Structurally, the residency is conducted as a longitudinal clinic experience carried out at the Castle Point main campus and 2-3 rural health Community Based Outpatient Clinics (CBOCs). The resident is simultaneously expected to prioritize and work on the ongoing clinical, didactic, administrative, and project activities. There is the opportunity for elective rotations that can be completed at the main campus to provide a well-rounded experience. The resident works closely with the Residency Program Director (RPD) and the primary preceptor(s) to develop goals and objectives that will assist the resident in expanding skills for current and future practice. Rotations are planned with each resident to maximize opportunities for learning and development of individual interests. Regular meetings with the RPD ensure that long-term goals of the residency program are fulfilled.

2 weeks (July 1-12)	1.5-2 months (July-Aug)	3 months (Sept-Nov)	1 month (Dec)	3 months (Jan-Mar)	3 months (Apr-Jun)
Orientation VA HVHCS Orientation, Pharmacy Orientation (outpatient & inpatient pharmacy staffing), Residency Learning System	Orientation <i>cont'd</i> Ambulatory Care/CBOC PACT and Longitudinal learning experiences: Anticoagulation, Clinical Pharmacy Management/Administration, Teaching & Health Education, Residency Project	Ambulatory Care/CBOC PACT and Longitudinal learning experiences: Anticoagulation, Clinical Pharmacy Management/Administration, Teaching & Health Education, Residency Project			
		Elective #1	Transitional ASHP Midyear Clinical Meeting, NF drug reviews	Elective #2	Elective #3

Benefits

- ♦ Competitive Stipend (estimated \$50,201)
- ♦ 13 paid annual leave days/13 paid sick days/10 paid federal holidays
- ♦ Subsidized health insurance
- ♦ Vision/dental benefit offered
- ♦ Free parking/lab coats/fitness center access
- ♦ Funds may be available to attend national and regional pharmacy conferences

Eligibility

Applicant must be a licensed pharmacist in any state, be a US citizen (a requirement to be employed by the Department of Veterans Affairs), have received a Doctor of Pharmacy degree from an accredited School of Pharmacy, and have successfully completed or be currently enrolled in a PGY1 Pharmacy Residency Program. Applicant must be able to commit to the residency for a period of no less than one year, and be a highly motivated pharmacist who desires advanced education and training in ambulatory care pharmacy.

**Candidates will be contacted for a formal on-site interview. A performance-based interview will be conducted.

Interview process includes a 15-20 minute case presentation. Ambulatory care related therapeutic topic/case discussions may also be included in the interview process. Residency selection is made through the ASHP Resident Matching Program (<http://www.natmatch.com>).

For more information regarding the PGY2 Ambulatory Care Pharmacy Residency, please send all correspondence to: Karen M. Smith, PharmD, CGP, BCACP



National Matching
Code: #683465

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